

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Walker 4 NC

ADDRESS (number and street)

2941 Battleground Ave

Box 38334

Check if different
than previously
reported. (ACC)

Greensboro

NC

27438

2. **FEC IDENTIFICATION NUMBER ▼**

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C C00543231

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

NC

06

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y

01 / 01 / 2014

through

M M / D D / Y Y Y Y

03 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Charles Rakestraw

Signature of Treasurer

Charles Rakestraw

[Electronically Filed]

Date

M M / D D / Y Y Y Y

04 / 11 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 88

Write or Type Committee Name

Walker 4 NC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	72811.80	202339.60
(b) Total Contribution Refunds (from Line 20(d))	0.00	600.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	72811.80	201739.60
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	59873.49	178462.78
(b) Total Offsets to Operating Expenditures (from Line 14).....	34.61	50.56
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	59838.88	178412.22
8. Cash on Hand at Close of Reporting Period (from Line 27).....	21627.38	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 88

Write or Type Committee Name

Walker 4 NC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

I. RECEIPTS**COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

55090.00

157588.32

(ii) Unitemized.....

11681.00

31823.00

(iii) TOTAL of contributions from individuals ▶

66771.00

189411.32

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

6040.80

12928.28

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

72811.80

202339.60

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

34.61

50.56

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

72846.41

202390.16

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	59873.49	178462.78
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	600.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	600.00
21. OTHER DISBURSEMENTS	600.00	1700.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	60473.49	180762.78

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	9254.46
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	72846.41
25. SUBTOTAL (add Line 23 and Line 24).....	82100.87
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	60473.49
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	21627.38

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: F3N
Transaction ID :

Schedule B includes all required memo entries for reimbursements. All additional reimbursements do not meet the \$200.00 per vendor aggregate threshold.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 88
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial) June D Alexander		Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2014	
Mailing Address 19 Stonecreek Ct		Transaction ID : SA11AI.5858	
City Greensboro	State NC	Zip Code 27455-2242	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2000.00		

B. Full Name (Last, First, Middle Initial) Christine E Alford		Date of Receipt M M / D D / Y Y Y Y 02 / 28 / 2014	
Mailing Address PO Box 1031		Transaction ID : SA11AI.5703	
City Kernersville	State NC	Zip Code 27285	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Triad Compounding Pharmacy	Occupation Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

C. Full Name (Last, First, Middle Initial) Horace J Alligood		Date of Receipt M M / D D / Y Y Y Y 02 / 14 / 2014	
Mailing Address 6100 W Friendly Ave		Transaction ID : SA11AI.5645	
City Greensboro	State NC	Zip Code 27410	Amount of Each Receipt this Period _____ 200.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 700.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 2200.00
TOTAL This Period (last page this line number only).....	_____

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Minnie B Andrews

Mailing Address 4829 Grafton Rd

City

Greensboro

State

NC

Zip Code

27405-9443

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		10		2014

Transaction ID : SA11AI.5631

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Maria Elena Arias

Mailing Address 6733 Idlewild Street

City

Fort Myers

State

FL

Zip Code

33966

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : SA11AI.5919

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Rick Artiga

Mailing Address 1541 New Garden Rd
Apt 2B

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Meridian Associates

Occupation

Engineer

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		28		2014

Transaction ID : SA11AI.5588

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1200.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial) Rick Artiga		Date of Receipt M M / D D / Y Y Y Y 02 / 28 / 2014	
Mailing Address 1541 New Garden Rd Apt 2B		Transaction ID : SA11AI.5735	
City Greensboro	State NC	Zip Code 27410	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Meridian Associates	Occupation Engineer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 730.00		
B. Full Name (Last, First, Middle Initial) Rick Artiga		Date of Receipt M M / D D / Y Y Y Y 03 / 12 / 2014	
Mailing Address 1541 New Garden Rd Apt 2B		Transaction ID : SA11AI.5874	
City Greensboro	State NC	Zip Code 27410	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00	
Name of Employer Meridian Associates	Occupation Engineer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 740.00		
C. Full Name (Last, First, Middle Initial) Rick Artiga		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014	
Mailing Address 1541 New Garden Rd Apt 2B		Transaction ID : SA11AI.6178	
City Greensboro	State NC	Zip Code 27410	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Meridian Associates	Occupation Engineer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 840.00		
SUBTOTAL of Receipts This Page (optional).....		210.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial) Bruce Ashley		Date of Receipt M M / D D / Y Y Y Y 02 / 10 / 2014	
Mailing Address 807 Rollingwood Dr		Transaction ID : SA11AI.5605	
City Greensboro	State NC	Zip Code 27410	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Smith Moore Leatherwood LLP	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2500.00		

B. Full Name (Last, First, Middle Initial) Paul W Bailey		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2014	
Mailing Address 3402 Willow Grove Ct		Transaction ID : SA11AI.5921	
City Greensboro	State NC	Zip Code 27410-8800	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1500.00		

C. Full Name (Last, First, Middle Initial) Dwight D Bates		Date of Receipt M M / D D / Y Y Y Y 01 / 16 / 2014	
Mailing Address 405 Quicksilver Ct		Transaction ID : SA11AI.5563	
City Greensboro	State NC	Zip Code 27455	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Greensboro Ear Nose and Throat	Occupation Physician		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2125.00		

SUBTOTAL of Receipts This Page (optional)	_____ 2500.00
TOTAL This Period (last page this line number only)	_____

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Robert Bauer

A.

Mailing Address 442 Stanley Rd

City

Stokesdale

State

NC

Zip Code

27357

FEC ID number of contributing
federal political committee.

C

Name of Employer

Snow Ent

Occupation

IT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		04		2014

Transaction ID : SA11AI.5799

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Lynn T Bensy

B.

Mailing Address 4800 Sweetbriar Road

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		12		2014

Transaction ID : SA11AI.5812

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Cindy Boger

C.

Mailing Address 3 Drakestone Ct

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		13		2014

Transaction ID : SA11AI.5392

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

375.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Cindy Boger

Mailing Address 3 Drakestone Ct

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		29		2014

Transaction ID : SA11AI.5589

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

Cindy Boger

Mailing Address 3 Drakestone Ct

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SA11AI.5736

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

Cindy Boger

Mailing Address 3 Drakestone Ct

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SA11AI.5787

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

75.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 88

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Cindy Boger

Mailing Address 3 Drakestone Ct

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

390.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2014

Transaction ID : SA11AI.6179

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

Cindy Boger

Mailing Address 3 Drakestone Ct

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

640.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : SA11AI.6130

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Cindy Boger

Mailing Address 3 Drakestone Ct

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

665.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : SA11AI.6148

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

300.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 88

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Buddy Brown

A.

Mailing Address PO Box 2378

City

Ozark

State

AL

Zip Code

36361

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Construction

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		24		2014

Transaction ID : SA11AI.5580

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

William J Bryan

B.

Mailing Address 8203 Fox Briar Ct

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

820.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : SA11AI.5934

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

Joseph Burns

C.

Mailing Address 5 Lake Forest Court

City

Greensboro

State

NC

Zip Code

27408

FEC ID number of contributing
federal political committee.

C

Name of Employer

Westchester Country Day School

Occupation

Instructor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		30		2014

Transaction ID : SA11AI.6137

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1700.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 88

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Steve Burns

Mailing Address 9 Rosebay Ln

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		21		2014

Transaction ID : SA11AI.5547

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

David L Buster

Mailing Address 5 Kelvington Ct

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		26		2014

Transaction ID : SA11AI.6164

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Flora C Carter

Mailing Address 5006 Heathridge Terrace

City

Greensboro

State

NC

Zip Code

27410-8418

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		13		2014

Transaction ID : SA11AI.5886

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....

425.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 15 OF 88

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Judy S Carter

Mailing Address 3312 Doral Court

City

Burlington

State

NC

Zip Code

27215

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : SA11AI.5924

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Robert Carter

Mailing Address 5006 Heathridge Ter

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : SA11AI.6170

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Karolyn J Champman

Mailing Address 5084 Riverchase Ridge

City

Winston Salem

State

NC

Zip Code

27104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SA11AI.5699

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 16 OF 88

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Ann Clippard**A.**

Mailing Address 8404 Creeks Edge Ct

City

Oak Ridge

State

NC

Zip Code

27310

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Sales & Marketing - Retail

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		01		2014

Transaction ID : SA11AI.5795

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Glenn Cobb**B.**

Mailing Address 4925 Chestnut Hill Lane

City

Winston Salem

State

NC

Zip Code

27106

FEC ID number of contributing
federal political committee.

C

Name of Employer

Winston-Salem Regional AOR

Occupation

Administrative Professional - Chief Ex

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : SA11AI.6131

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Catherine J Coggins**C.**

Mailing Address PO Box 1300

City

De Land

State

FL

Zip Code

32721

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		25		2014

Transaction ID : SA11AI.5915

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

450.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 88

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Leslie S Coggins

Mailing Address PO Box 1300

City

De Land

State

FL

Zip Code

32721

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2014

Transaction ID : SA11AI.5914

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Gary L Collins

Mailing Address 7466 Henson Forest Dr

City

Summerfield

State

NC

Zip Code

27358

FEC ID number of contributing
federal political committee.

C

Name of Employer

SMO

Occupation

VP of Operations

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2014

Transaction ID : SA11AI.6161

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Jason C Copland

Mailing Address 3156 Abingdon Place

City

Burlington

State

NC

Zip Code

27215

FEC ID number of contributing
federal political committee.

C

Name of Employer

Coplane Fabrics

Occupation

CEO

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2014

Transaction ID : SA11AI.5597

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2600.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 18 OF 88

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Judy J Copple

Mailing Address 639 Plainfield Rd

City

Greensboro

State

NC

Zip Code

27455-8235

FEC ID number of contributing
federal political committee.

C

Name of Employer

Westover Apartments, Inc.

Occupation

Secretary

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		21		2014

Transaction ID : SA11AI.5676

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Judy J Copple

Mailing Address 639 Plainfield Rd

City

Greensboro

State

NC

Zip Code

27455-8235

FEC ID number of contributing
federal political committee.

C

Name of Employer

Westover Apartments, Inc.

Occupation

Secretary

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		10		2014

Transaction ID : SA11AI.5802

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Clay M Custer

Mailing Address 301 Montebello Drive

City

Greenville

State

SC

Zip Code

29609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Womble Carlyle

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

Transaction ID : SA11AI.5849

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1100.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 19 OF 88

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Robert D Davidson

A.

Mailing Address 2915 Isaacs Pl

City

Greensboro

State

NC

Zip Code

27408-2709

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		14		2014

Transaction ID : SA11AI.5636

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Richard D Dietz

B.

Mailing Address 1018 S Hawthorne Road

City

Winston Salem

State

NC

Zip Code

27103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kilpatrick Townsend & Stockton

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SA11AI.5693

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Cynthia Douglas

C.

Mailing Address 4704 Towne Ridge Dr

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		12		2014

Transaction ID : SA11AI.5818

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

650.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Tammy Edwards

A.

Mailing Address 4500 Lewiston Oaks Ct

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer

First Presbyterian Church

Occupation

Accountant

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 30 / 2014

Transaction ID : SA11AI.6140

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Dr. Gerald W Eggers

B.

Mailing Address 1216 Brook Acres Trail

City

Clemmons

State

NC

Zip Code

27012

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Pathologist

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 28 / 2014

Transaction ID : SA11AI.5707

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Grey Ellis

C.

Mailing Address 107 Kirk Rd

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Media Transfer

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1260.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 20 / 2014

Transaction ID : SA11AI.5570

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Grey Ellis

Mailing Address 107 Kirk Rd

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Media Transfer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		20		2014

Transaction ID : SA11AI.5786

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Bonnie Evanfield

Mailing Address 6118 Westend Drive

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		11		2014

Transaction ID : SA11AI.5832

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Dr. John A Fagg

Mailing Address 403 Arbor Road

City

Winston Salem

State

NC

Zip Code

27104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Forsyth Plastic Surgery

Occupation

Surgeon

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SA11AI.5690

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 22 OF 88

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Brenda Formo

Mailing Address 4116 O'Briant Pl

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		14		2014

Transaction ID : SA11AI.5396

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Brenda Formo

Mailing Address 4116 O'Briant Pl

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2014

Transaction ID : SA11AI.6159

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

Thomas C Furstenberg

Mailing Address 612 W Jackson St

City

Mayodan

State

NC

Zip Code

27027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Restaurant Owner

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : SA11AI.6118

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1550.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 23 OF 88

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Kathy M Gardner

Mailing Address 4602 Norsaw Ct

City

Greensboro

State

NC

Zip Code

27410-8447

FEC ID number of contributing
federal political committee.

C

Name of Employer

BB&T

Occupation

IT Systems Analyst

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		10		2014

Transaction ID : SA11AI.5630

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Kathy M Gardner

Mailing Address 4602 Norsaw Ct

City

Greensboro

State

NC

Zip Code

27410-8447

FEC ID number of contributing
federal political committee.

C

Name of Employer

BB&T

Occupation

IT Systems Analyst

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		21		2014

Transaction ID : SA11AI.5677

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Kathy M Gardner

Mailing Address 4602 Norsaw Ct

City

Greensboro

State

NC

Zip Code

27410-8447

FEC ID number of contributing
federal political committee.

C

Name of Employer

BB&T

Occupation

IT Systems Analyst

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

Transaction ID : SA11AI.5851

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

300.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Sean Gilboy

Mailing Address 114 Forest Lake Trl

City

Reidsville

State

NC

Zip Code

27320

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liquip International

Occupation

Engineer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		17		2014

Transaction ID : SA11AI.6251

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. John Gouch

Mailing Address 1042 Assembly Str

City

Belmont

State

NC

Zip Code

28012

FEC ID number of contributing
federal political committee.

C

Name of Employer

Gethsemane Cemetary

Occupation

Funeral Services

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		26		2014

Transaction ID : SA11AI.6162

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Lori Greeson

Mailing Address 9 Claridge Court

City

Greensboro

State

NC

Zip Code

27407

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		25		2014

Transaction ID : SA11AI.5897

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1900.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial) Lee Guthrie			Date of Receipt M M / D D / Y Y Y Y 01 / 01 / 2014	
Mailing Address 7 Orchard Grass Ct			Transaction ID : SA11AI.5369	
City Greensboro	State NC	Zip Code 27410	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00		
Name of Employer Guilford County Sheriff's Offi		Occupation Government - Protection & Fire		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 270.00		
B. Full Name (Last, First, Middle Initial) Lee Guthrie			Date of Receipt M M / D D / Y Y Y Y 02 / 12 / 2014	
Mailing Address 7 Orchard Grass Ct			Transaction ID : SA11AI.5664	
City Greensboro	State NC	Zip Code 27410	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00		
Name of Employer Guilford County Sheriff's Offi		Occupation Government - Protection & Fire		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 520.00		
C. Full Name (Last, First, Middle Initial) Lee Guthrie			Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 7 Orchard Grass Ct			Transaction ID : SA11AI.6136	
City Greensboro	State NC	Zip Code 27410	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00		
Name of Employer Guilford County Sheriff's Offi		Occupation Government - Protection & Fire		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 770.00		
SUBTOTAL of Receipts This Page (optional).....			750.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Lynn M Guthrie

Mailing Address **7 Orchard Grass Ct**

City Greensboro State NC Zip Code 27410

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1940.00

Date of Receipt

M M / D D / Y Y Y Y
03 24 2014

Transaction ID : SA11AI.5918

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
Rick Haase

Mailing Address **1412 DeSoto PI**

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. **C**

Name of Employer Lincoln Financial Group Occupation Systems Specialist

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt

M M / D D / Y Y Y Y
01 23 2014

Transaction ID : SA11AI.5577

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Rick Haase

Mailing Address **1412 DeSoto PI**

City Greensboro State NC Zip Code 27408

FEC ID number of contributing federal political committee. **C**

Name of Employer Lincoln Financial Group Occupation Systems Specialist

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt

M M / D D / Y Y Y Y
03 14 2014

Transaction ID : SA11AI.6253

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

2000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Rick Haase

Mailing Address 1412 DeSoto Pl

City

Greensboro

State

NC

Zip Code

27408

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lincoln Financial GroupOccupation
Systems Specialist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		26		2014

Transaction ID : SA11AI.6160

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Stephanie Haigler

Mailing Address 4220 Edith Lane, Apt A

City

Greensboro

State

NC

Zip Code

27409

FEC ID number of contributing
federal political committee.

C

Name of Employer
Larry Pearman, Attorney at LawOccupation
Legal Assistant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : SA11AI.5916

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

Pamela Foster Hanzaker

Mailing Address 5016 Castling Way

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-EmployedOccupation
Psychologist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

Transaction ID : SA11AI.5844

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1150.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial) Michael A Haran			Date of Receipt M M / D D / Y Y Y Y 01 / 01 / 2014	
Mailing Address 4312 E NC HWY 150			Transaction ID : SA11AI.5371	
City	State	Zip Code		
Browns Summit	NC	27214-9695		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 25.00	
Name of Employer Retired		Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 425.00		
B. Full Name (Last, First, Middle Initial) Michael A Haran			Date of Receipt M M / D D / Y Y Y Y 02 / 01 / 2014	
Mailing Address 4312 E NC HWY 150			Transaction ID : SA11AI.5740	
City	State	Zip Code		
Browns Summit	NC	27214-9695		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 25.00	
Name of Employer Retired		Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 450.00		
C. Full Name (Last, First, Middle Initial) Michael A Haran			Date of Receipt M M / D D / Y Y Y Y 03 / 01 / 2014	
Mailing Address 4312 E NC HWY 150			Transaction ID : SA11AI.5793	
City	State	Zip Code		
Browns Summit	NC	27214-9695		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 25.00	
Name of Employer Retired		Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 475.00		
SUBTOTAL of Receipts This Page (optional).....			75.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Carla Harper

A.

Mailing Address PO Box 39436

City

Greensboro

State

NC

Zip Code

27438

FEC ID number of contributing
federal political committee.

C

Name of Employer

West 65

Occupation

Owner/Consulatant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		17		2014

Transaction ID : SA11AI.5543

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Dean Harrison

B.

Mailing Address 709 Carnegie Place

City

Greensboro

State

NC

Zip Code

27409

FEC ID number of contributing
federal political committee.

C

Name of Employer

Graham Sports

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : SA11AI.6116

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Doris Hartfield

C.

Mailing Address 8317 Providence North Dr

City

Stokesdale

State

NC

Zip Code

27357

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		12		2014

Transaction ID : SA11AI.5811

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

450.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Victoria Hawk

A.

Mailing Address 8107 Rogers Court

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

VA Medical Center

Occupation

Dietitian

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		25		2014

Transaction ID : SA11AI.5904

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Matthew Hayduk

B.

Mailing Address 102 Ansley Ct

City

Greer

State

SC

Zip Code

29650

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Self-Employed

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		14		2014

Transaction ID : SA11AI.5652

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

Carman Hicks

C.

Mailing Address 5 Ware Creek Ct

City

Durham

State

NC

Zip Code

27713

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hicks & Assoc

Occupation

Financial Services

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		19		2014

Transaction ID : SA11AI.5571

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1850.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial)
Joe Hill

Mailing Address 3508 Vernon St

City Greensboro State NC Zip Code 27408-2920

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1315.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 18 / 2014

Transaction ID : SA11AI.5776

Amount of Each Receipt this Period

200.00

B. Full Name (Last, First, Middle Initial)
Virginia L Himmelrich

Mailing Address 120 Shorelake Dr
Apt A

City Greensboro State NC Zip Code 27455-1456

FEC ID number of contributing federal political committee. C

Name of Employer Chartiers High School Occupation Teacher

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 10 / 2014

Transaction ID : SA11AI.5603

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Ralph M Holt Jr.

Mailing Address PO Box 819

City Burlington State NC Zip Code 27216

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 28 / 2014

Transaction ID : SA11AI.5730

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1700.00

SCHEDULE A (FEC Form 3)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Joseph Howell

Mailing Address 1039 Samuels Way Drive

City

Huntersville

State

NC

Zip Code

28078

FEC ID number of contributing
federal political committee.

C

Name of Employer

Thomas Digital

Occupation

Television

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		11		2014

Transaction ID : SA11AI.5834

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

David J Johnson

Mailing Address 5673 Trevino Dr

City

Milton

State

FL

Zip Code

32570-8215

FEC ID number of contributing
federal political committee.

C

Name of Employer

Farm Bureau Insurance

Occupation

Insurance Agent

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2014

Transaction ID : SA11AI.5928

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Jo Kelly Kay

Mailing Address PO Box 8284

City

Greensboro

State

NC

Zip Code

27419

FEC ID number of contributing
federal political committee.

C

Name of Employer

Legal Assistant

Occupation

Larry W. Pearman, Attorney at Law

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

465.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2014

Transaction ID : SA11AI.5930

Amount of Each Receipt this Period

465.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

965.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Cheryl L Kingman

A.

Mailing Address 223 Oakmont Dr

City

Advance

State

NC

Zip Code

27006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2014

Transaction ID : SA11AI.5698

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

Cheryl L Kingman

B.

Mailing Address 223 Oakmont Dr

City

Advance

State

NC

Zip Code

27006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2014

Transaction ID : SA11AI.5826

Amount of Each Receipt this Period

-300.00

Reattributed to G Kingman

Full Name (Last, First, Middle Initial)

Gil Kingman

C.

Mailing Address 223 Oakmont Dr

City

Advance

State

NC

Zip Code

27006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Forsyth Plastic Surgery

Occupation

Plastic Surgeon

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2014

Transaction ID : SA11AI.5827

Amount of Each Receipt this Period

300.00

Reattributed: from C kingman

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Brian Korn

Mailing Address 110 Maple Glade Drive

City

Reidsville

State

NC

Zip Code

27320

FEC ID number of contributing
federal political committee.

C

Name of Employer

Miller Brewing Company

Occupation

Manager

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : SA11AI.5937

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. David M Kuratnick

Mailing Address 1812 Nottingham Rd

City

Greensboro

State

NC

Zip Code

27408

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		14		2014

Transaction ID : SA11AI.5654

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

C. David M Kuratnick

Mailing Address 1812 Nottingham Rd

City

Greensboro

State

NC

Zip Code

27408

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		12		2014

Transaction ID : SA11AI.5805

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1800.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Sarah G Kuratnick

Mailing Address 1812 Nottingham Road

City

Greensboro

State

NC

Zip Code

27408

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : SA11AI.5935

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Rachel B Lawrence

Mailing Address 123 Shorelake Dr

Apt A

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		10		2014

Transaction ID : SA11AI.5623

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Rachel B Lawrence

Mailing Address 123 Shorelake Dr

Apt A

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : SA11AI.6105

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

625.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Kelli Lyerly

Mailing Address 6311 Linda Dr

City

Lewisville

State

NC

Zip Code

27023

FEC ID number of contributing
federal political committee.

C

Name of Employer
Neurosurgical SolutionsOccupation
Receptionist

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		07		2014

Transaction ID : SA11AI.5764

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

James W Maness Jr

Mailing Address 7375 Doggett Rd

City

Browns Summit

State

NC

Zip Code

27214-9583

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Fire Department

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		17		2014

Transaction ID : SA11AI.5542

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

Janice Maness

Mailing Address 7375 Doggett Rd

City

Browns Summit

State

NC

Zip Code

27214

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		12		2014

Transaction ID : SA11AI.5808

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1300.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 37 OF 88

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

James Manning

Mailing Address 4446 Ashton Oaks Court

City

High Point

State

NC

Zip Code

27265

FEC ID number of contributing
federal political committee.

C

Name of Employer

Novant Health

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		29		2014

Transaction ID : SA11AI.6145

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

Sloan Manning

Mailing Address 4446 Ashton Oaks Court

City

High Point

State

NC

Zip Code

27265

FEC ID number of contributing
federal political committee.

C

Name of Employer

Novant Health

Occupation

Health Care

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		04		2014

Transaction ID : SA11AI.5742

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Billy M Marcum

Mailing Address 1070 Old Store Ln

City

Kernersville

State

NC

Zip Code

27284-3852

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wake Forest University

Occupation

Professor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		14		2014

Transaction ID : SA11AI.5656

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1850.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 OF 88
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial) Robert A. J. McGrady		Date of Receipt M M / D D / Y Y Y Y 02 / 10 / 2014	
Mailing Address 100 Pineburr Rd		Transaction ID : SA11AI.5632	
City Greensboro	State NC	Zip Code 27455-1700	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1110.00		
B. Full Name (Last, First, Middle Initial) Shirley Monroe		Date of Receipt M M / D D / Y Y Y Y 01 / 14 / 2014	
Mailing Address 2702 Colton Dr		Transaction ID : SA11AI.5398	
City Oak Ridge	State NC	Zip Code 27310	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 225.00		
C. Full Name (Last, First, Middle Initial) Shirley Monroe		Date of Receipt M M / D D / Y Y Y Y 02 / 10 / 2014	
Mailing Address 2702 Colton Dr		Transaction ID : SA11AI.5766	
City Oak Ridge	State NC	Zip Code 27310	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 325.00		
SUBTOTAL of Receipts This Page (optional).....		225.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

David K Moore

A.

Mailing Address 590 Eden Rock Rd

City

Lewisville

State

NC

Zip Code

27023-8240

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chick-Fil-A

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		27		2014

Transaction ID : SA11AI.5586

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

David K Moore

B.

Mailing Address 590 Eden Rock Rd

City

Lewisville

State

NC

Zip Code

27023-8240

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chick-Fil-A

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		13		2014

Transaction ID : SA11AI.5879

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

Dennis F Moore

C.

Mailing Address 3714 Watauga Dr

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SA11AI.5685

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1125.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Thomas R Neese Jr

A.

Mailing Address 1003 Pebble Drive

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Neese Sausage Company

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		22		2014

Transaction ID : SA11AI.5553

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Pamela J Newkirk

B.

Mailing Address 3601 Timberoak Drive

City

Greensboro

State

NC

Zip Code

27410-2142

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

Transaction ID : SA11AI.5845

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

Robin J Parker

C.

Mailing Address 5908 Founders Dr

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apple, Koceja & Assoc., CPAs

Occupation

Accountant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		14		2014

Transaction ID : SA11AI.5397

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2350.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Robin J Parker

Mailing Address 5908 Founders Dr

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apple, Koceja & Assoc., CPAs

Occupation

Accountant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : SA11AI.6106

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Greg Pearman

Mailing Address 10 Highland Bluff Ct

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Larry W Pearman, Attorney

Occupation

Paralegal

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

445.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : SA11AI.5932

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

C. Tina D Peeden

Mailing Address 628 Beckenhill Drive

City

Julian

State

NC

Zip Code

27283

FEC ID number of contributing
federal political committee.

C

Name of Employer

Larry Pearman, Attorney

Occupation

Office Manager

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

465.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : SA11AI.5926

Amount of Each Receipt this Period

465.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1865.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Arvil Pennington

Mailing Address 3006 Edgewater Dr

City

Greensboro

State

NC

Zip Code

27403

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lawndale Baptist Church

Occupation

Minister

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Transaction ID : SA11AI.5599

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. Anthony B Pettit

Mailing Address 1101 Dover Rd

City

Greensboro

State

NC

Zip Code

27408-7313

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lorillard

Occupation

VP, CAO & Controller

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		25		2014

Transaction ID : SA11AI.5913

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Daniel Pierce

Mailing Address 150 Dogwood Acres

City

Madison

State

NC

Zip Code

27025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Pastor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1030.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		13		2014

Transaction ID : SA11AI.5883

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

435.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Kevin B Powell

Mailing Address 5573 Brookberry Farm Rd

City

Winston Salem

State

NC

Zip Code

27106-8763

FEC ID number of contributing
federal political committee.

C

Name of Employer

Foothil Ford

Occupation

Owner

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		27		2014

Transaction ID : SA11AI.5584

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Susan Rakestraw

Mailing Address 208 Twin Creeks Dr

City

Stokesdale

State

NC

Zip Code

27357

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SA11AI.5680

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Susan Rakestraw

Mailing Address 208 Twin Creeks Dr

City

Stokesdale

State

NC

Zip Code

27357

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : SA11AI.6110

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Deborah H Ratliff

A.

Mailing Address 90 Heron's Bill Dr

City

Bluffton

State

SC

Zip Code

29909

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : SA11AI.6135

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Suzanne P Reed

B.

Mailing Address 1231 Chester Road

City

Winston Salem

State

NC

Zip Code

27104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Calvary Baptist Day School

Occupation

Teacher

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SA11AI.5696

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Judy F Rees

C.

Mailing Address 214 River Rhys Trl

City

Pilot Mountain

State

NC

Zip Code

27041

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		17		2014

Transaction ID : SA11AI.5541

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

2050.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 OF 88
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walker 4 NC

A. Full Name (Last, First, Middle Initial) Janet S Reynolds		Date of Receipt M M / D D / Y Y Y Y 02 / 04 / 2014	
Mailing Address 30 Josephine Cir		Transaction ID : SA11AI.5759	
City Greensboro	State NY	Zip Code 27410-4176	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Retired	Occupation Receptionist / Admin Assistant		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 280.00		

B. Full Name (Last, First, Middle Initial) Joe Robertson		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 5904 Founders Dr		Transaction ID : SA11AI.6115	
City Greensboro	State NC	Zip Code 27410	Amount of Each Receipt this Period _____ 350.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 850.00		

C. Full Name (Last, First, Middle Initial) Brenda C Ryals		Date of Receipt M M / D D / Y Y Y Y 02 / 03 / 2014	
Mailing Address 4815 Lake Laurel Ct		Transaction ID : SA11AI.5595	
City Greensboro	State NC	Zip Code 27455	Amount of Each Receipt this Period _____ 25.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 555.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 425.00
TOTAL This Period (last page this line number only).....	_____

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

David M Scott

A.

Mailing Address 1777 Foxhall Lane

City

Mebane

State

NC

Zip Code

27302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sales Professional

Occupation

Scott Sales, LLC

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		12		2014

Transaction ID : SA11AI.5809

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Kenneth Severance

B.

Mailing Address 297 Pin Tail DRIVE

City

Reidsville

State

NC

Zip Code

27320

FEC ID number of contributing
federal political committee.

C

Name of Employer

Davenport & Company

Occupation

Financial Services

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2014

Transaction ID : SA11AI.6174

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Byron Severson

C.

Mailing Address 6409 Peppermill Rd

City

Oak Ridge

State

NC

Zip Code

27310

FEC ID number of contributing
federal political committee.

C

Name of Employer

Honda Aircraft Co

Occupation

Sales

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2014

Transaction ID : SA11AI.5590

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

550.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Byron Severson

Mailing Address 6409 Peppermill Rd

City

Oak Ridge

State

NC

Zip Code

27310

FEC ID number of contributing
federal political committee.

C

Name of Employer

Honda Aircraft Co

Occupation

Sales

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2014

Transaction ID : SA11AI.5737

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Byron Severson

Mailing Address 6409 Peppermill Rd

City

Oak Ridge

State

NC

Zip Code

27310

FEC ID number of contributing
federal political committee.

C

Name of Employer

Honda Aircraft Co

Occupation

Sales

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

440.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		01		2014

Transaction ID : SA11AI.5794

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Jonathan D Shepherd

Mailing Address 8107 Rogers Ct

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

AT&T

Occupation

Director

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2014

Transaction ID : SA11AI.5882

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1200.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:

PAGE 48 OF 88

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Kevin Smith

A.

Mailing Address 4800 Tenby Drive

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

One Source Document Solutions

Occupation

Computer Software

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		04		2014

Transaction ID : SA11AI.5760

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Richard W Snow

B.

Mailing Address PO Box 1046

City

Kernersville

State

NC

Zip Code

27285

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SA11AI.5695

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Nathan Tabor

C.

Mailing Address 5556 Long Walk Drive

City

Kernersville

State

NC

Zip Code

27284

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Developer

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		26		2014

Transaction ID : SA11AI.5778

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Diana A Tate

A.

Mailing Address 701 Simpson St

City

Greensboro

State

NC

Zip Code

27401-1631

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Sales

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

560.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		12		2014

Transaction ID : SA11AI.5667

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

Jan Larue Thomas

B.

Mailing Address 1 Bellinghaus Lane

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lawndale Baptist Church

Occupation

Administrative Assistant

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

Transaction ID : SA11AI.5859

Amount of Each Receipt this Period

220.00

Full Name (Last, First, Middle Initial)

Scott M Thomas

C.

Mailing Address 612 Wedgedale Ave

City

Greensboro

State

NC

Zip Code

27403-1087

FEC ID number of contributing
federal political committee.

C

Name of Employer

Scott Private Wealth

Occupation

Financial Advisor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		27		2014

Transaction ID : SA11AI.6158

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

590.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Judy Tsuei

Mailing Address 18 Winterberry Ct

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		10		2014

Transaction ID : SA11AI.5381

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

Judy Tsuei

Mailing Address 18 Winterberry Ct

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

440.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		10		2014

Transaction ID : SA11AI.5830

Amount of Each Receipt this Period

20.00

Reattributed from M Tsuei

Full Name (Last, First, Middle Initial)

Matthew K Tsuei

Mailing Address 18 Winterberry Ct

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Central Carolina Surgery

Occupation

Surgeon

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2620.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		10		2014

Transaction ID : SA11AI.5380

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1020.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Matthew K Tsuei

Mailing Address 18 Winterberry Ct

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Central Carolina Surgery

Occupation

Surgeon

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		10		2014

Transaction ID : SA11AI.5829

Amount of Each Receipt this Period

-20.00

Reattributed to J Tsuei

Full Name (Last, First, Middle Initial)

Dr. Keith B Van Zandt

Mailing Address 3986 Huddington Court

City

Winston Salem

State

NC

Zip Code

27106

FEC ID number of contributing
federal political committee.

C

Name of Employer

Novant Health

Occupation

Family Physician

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SA11AI.5711

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Jerry W Walker

Mailing Address 8308 McCrory Rd

City

Stokesdale

State

NC

Zip Code

27357

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oak Level Baptist Church

Occupation

Pastor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1160.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SA11AI.5722

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

330.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Donald Wendelken

Mailing Address 3406 Windswept Dr

City

Summerfield

State

NC

Zip Code

27358

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Manager

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		04		2014

Transaction ID : SA11AI.5798

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Lane B West

Mailing Address 26 Kinglet Cir

City

Greensboro

State

NC

Zip Code

27455-1362

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Actuary

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		13		2014

Transaction ID : SA11AI.5384

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Lane B West

Mailing Address 26 Kinglet Cir

City

Greensboro

State

NC

Zip Code

27455-1362

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Actuary

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		27		2014

Transaction ID : SA11AI.6156

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

475.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Tamara G Wilson

Mailing Address 8201 Hunting Cog Rd

City

Oak Ridge

State

NC

Zip Code

27310

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Vacuum CenterOccupation
Owner

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2014

Transaction ID : SA11AI.5619

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Russell Wood

Mailing Address 4704 Barrington Place Ct

City

Jamestown

State

NC

Zip Code

27282

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2014

Transaction ID : SA11AI.5754

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Yvonne M Wood

Mailing Address 3831 S Atlantic Ave
Unit 801

City

Daytona Beach

State

FL

Zip Code

32118

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		17		2014

Transaction ID : SA11AI.5539

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

650.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

David N Woods

A.

Mailing Address 214 Kensington Road

City

Greensboro

State

NC

Zip Code

27403

FEC ID number of contributing
federal political committee.

C

Name of Employer

Attorney

Occupation

Wyatt Early Harris Wheeler

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		12		2014

Transaction ID : SA11Al.5816

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

55090.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

Bradley Mark Walker

Mailing Address 3315 Van Allen Ct

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C H4NC06052

Name of Employer

Lawndale Baptist Church

Occupation

Minister

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

8627.48

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		10		2014

Transaction ID : SA11D.5668

Amount of Each Receipt this Period

1740.00

In-kind - Filing Fee

Full Name (Last, First, Middle Initial)

Bradley Mark Walker

Mailing Address 3315 Van Allen Ct

City

Greensboro

State

NC

Zip Code

27410

FEC ID number of contributing
federal political committee.

C H4NC06052

Name of Employer

Lawndale Baptist Church

Occupation

Minister

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

12928.28

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2014

Transaction ID : SA11D.6297

Amount of Each Receipt this Period

4300.80

In-kind - Mileage

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6040.80

6040.80

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 56 OF 88

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Amazon.com

Mailing Address 410 Terry Ave N

City	State	Zip Code
Seattle	WA	98109

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		10		2014

Amount of Each Disbursement this Period

29.57

Transaction ID : SB17.6051

B. Amazon.com

Mailing Address 410 Terry Ave N

City	State	Zip Code
Seattle	WA	98109

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		10		2014

Amount of Each Disbursement this Period

21.31

Transaction ID : SB17.6054

C. Amazon.com

Mailing Address 410 Terry Ave N

City	State	Zip Code
Seattle	WA	98109

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		10		2014

Amount of Each Disbursement this Period

16.00

Transaction ID : SB17.6055

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

66.88

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Amazon.com

Mailing Address 410 Terry Ave N

City	State	Zip Code
Seattle	WA	98109

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		11		2014

Amount of Each Disbursement this Period

15.99

Transaction ID : SB17.6057

B. Amazon.com

Mailing Address 410 Terry Ave N

City	State	Zip Code
Seattle	WA	98109

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		18		2014

Amount of Each Disbursement this Period

37.82

Transaction ID : SB17.6063

C. Amazon.com

Mailing Address 410 Terry Ave N

City	State	Zip Code
Seattle	WA	98109

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		28		2014

Amount of Each Disbursement this Period

45.06

Transaction ID : SB17.6102

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

98.87

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Amazon.com

Mailing Address 410 Terry Ave N

City	State	Zip Code
Seattle	WA	98109

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	---------------------------------------------------------------------------------------------------------

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
-------------------	------------------------------------------------------------------------------------------------------------------

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 28 / 2014

Amount of Each Disbursement this Period

32.01

Transaction ID : SB17.6103

B. AMERICAN CONSERVATIVE UNIONMailing Address 1331 H STREET NW
SUITE 500

City	State	Zip Code
WASHINGTON	DC	20005

Purpose of Disbursement
Event Fee

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	---------------------------------------------------------------------------------------------------------

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
-------------------	------------------------------------------------------------------------------------------------------------------

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 02 / 2014

Amount of Each Disbursement this Period

550.00

Transaction ID : SB17.5945

C. Aneidot, Inc.

Mailing Address 214 Third Street, Suite 2B

City	State	Zip Code
Baton Rouge	LA	70801

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	---------------------------------------------------------------------------------------------------------

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
-------------------	------------------------------------------------------------------------------------------------------------------

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 31 / 2014

Amount of Each Disbursement this Period

22.47

Transaction ID : SB17.6048

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

604.48

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 59 OF 88

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address PO Box 8999

City	State	Zip Code
San Francisco	CA	94128-8999

Purpose of Disbursement
Merchant Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		03		2014

Amount of Each Disbursement this Period

32.00

Transaction ID : SB17.5955

B. Authorize.net

Mailing Address PO Box 8999

City	State	Zip Code
San Francisco	CA	94128-8999

Purpose of Disbursement
Merchant Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2014

Amount of Each Disbursement this Period

35.05

Transaction ID : SB17.6035

C. Authorize.net

Mailing Address PO Box 8999

City	State	Zip Code
San Francisco	CA	94128-8999

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2014

Amount of Each Disbursement this Period

35.85

Transaction ID : SB17.6187

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

102.90

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 60 OF 88

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Lori Bardsley

Mailing Address 100 Victoria Ln

City	State	Zip Code
Gibsonville	NC	27249

Purpose of Disbursement
Field Representative

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.5976

B. Lori Bardsley

Mailing Address 100 Victoria Ln

City	State	Zip Code
Gibsonville	NC	27249

Purpose of Disbursement
Field Representative

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		29		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.6018

c. Lori Bardsley

Mailing Address 100 Victoria Ln

City	State	Zip Code
Gibsonville	NC	27249

Purpose of Disbursement
Field Representative

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.6059

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1500.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 61 OF 88

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Lori Bardsley

Mailing Address 100 Victoria Ln

City	State	Zip Code
Gibsonville	NC	27249

Purpose of Disbursement
Paint, Flowers, Cleaning Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2014

Amount of Each Disbursement this Period

180.55

Transaction ID : SB17.6239

B. CallFire IncMailing Address 1410 2nd St
Ste 200

City	State	Zip Code
Santa Monica	CA	90401

Purpose of Disbursement
Advertising

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2014

Amount of Each Disbursement this Period

1.79

Transaction ID : SB17.5962

c. CallFire IncMailing Address 1410 2nd St
Ste 200

City	State	Zip Code
Santa Monica	CA	90401

Purpose of Disbursement
Advertising

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		06		2014

Amount of Each Disbursement this Period

3.00

Transaction ID : SB17.6044

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

185.34

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 62 OF 88

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. CallFire IncMailing Address 1410 2nd St
Ste 200City State Zip Code
Santa Monica CA 90401Purpose of Disbursement
Advertising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	06	2014

Amount of Each Disbursement this Period

3.00

Transaction ID : SB17.6191

B. CM&Co, LLC

Mailing Address PO Box 97275

City State Zip Code
Raleigh NC 27624Purpose of Disbursement
Accounting Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	05	2014

Amount of Each Disbursement this Period

4739.07

Transaction ID : SB17.6040

c. Dan Collison

Mailing Address 3315 Cardinal Ridge Dr

City State Zip Code
Greensboro NC 27410Purpose of Disbursement
Field Representative

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	12	2014

Amount of Each Disbursement this Period

600.00

Transaction ID : SB17.6203

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5342.07

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Danville Register & Bee

Mailing Address 700 Monument St

City	State	Zip Code
Danville	VA	24541

Purpose of Disbursement
Advertising

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		20		2014

Amount of Each Disbursement this Period

304.68

Transaction ID : SB17.6215

B. DHARMA MERCHANT SERVICES

Mailing Address P.O. BOX 246

City	State	Zip Code
ALPHARETTA	GA	30009

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		02		2014

Amount of Each Disbursement this Period

112.81

Transaction ID : SB17.5952

C. DHARMA MERCHANT SERVICES

Mailing Address P.O. BOX 246

City	State	Zip Code
ALPHARETTA	GA	30009

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2014

Amount of Each Disbursement this Period

193.41

Transaction ID : SB17.6039

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

610.90

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. DHARMA MERCHANT SERVICES

Mailing Address P.O. BOX 246

City	State	Zip Code
ALPHARETTA	GA	30009

Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2014

Amount of Each Disbursement this Period

7	3	2	8	8
1	3	2	8	8

Transaction ID : SB17.6185

B. Charles Dyer

Mailing Address 513 S. Main St

City	State	Zip Code
Reidsville	NC	27320

Purpose of Disbursement
Rent

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		29		2014

Amount of Each Disbursement this Period

3	0	0	0	0
3	0	0	0	0

Transaction ID : SB17.6019

c. Charles Dyer

Mailing Address 513 S. Main St

City	State	Zip Code
Reidsville	NC	27320

Purpose of Disbursement
Rent

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		27		2014

Amount of Each Disbursement this Period

3	0	0	0	0
3	0	0	0	0

Transaction ID : SB17.6085

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

732.88

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 65 OF 88

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Embassy Suites

Mailing Address 204 Centreport Dr

City	State	Zip Code
Greensboro	NC	27409

Purpose of Disbursement
Site Fee, Catering

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 10 / 2014

Amount of Each Disbursement this Period

1503.84

Transaction ID : SB17.6056

B. Facebook

Mailing Address 1601 S California Ave

City	State	Zip Code
Palo Alto	CA	94304

Purpose of Disbursement
Advertising

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 06 / 2014

Amount of Each Disbursement this Period

44.39

Transaction ID : SB17.5959

c. Facebook

Mailing Address 1601 S California Ave

City	State	Zip Code
Palo Alto	CA	94304

Purpose of Disbursement
Advertising

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 10 / 2014

Amount of Each Disbursement this Period

49.50

Transaction ID : SB17.5969

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1597.73

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1601 S California Ave

City	State	Zip Code
Palo Alto	CA	94304

Purpose of Disbursement
Advertising

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2014

Amount of Each Disbursement this Period

50.50

Transaction ID : SB17.5974

B. Facebook

Full Name (Last, First, Middle Initial)

Mailing Address 1601 S California Ave

City	State	Zip Code
Palo Alto	CA	94304

Purpose of Disbursement
Advertising

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		24		2014

Amount of Each Disbursement this Period

32.31

Transaction ID : SB17.6008

C. Facebook

Full Name (Last, First, Middle Initial)

Mailing Address 1601 S California Ave

City	State	Zip Code
Palo Alto	CA	94304

Purpose of Disbursement
Advertising

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		26		2014

Amount of Each Disbursement this Period

27.69

Transaction ID : SB17.6012

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

110.50

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 67 OF 88

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1601 S California Ave

City	State	Zip Code
Palo Alto	CA	94304

Purpose of Disbursement
Advertising

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		27		2014

Amount of Each Disbursement this Period

46.44

Transaction ID : SB17.6014

B. Facebook

Full Name (Last, First, Middle Initial)

Mailing Address 1601 S California Ave

City	State	Zip Code
Palo Alto	CA	94304

Purpose of Disbursement
Advertising

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		06		2014

Amount of Each Disbursement this Period

33.64

Transaction ID : SB17.6043

C. Facebook

Full Name (Last, First, Middle Initial)

Mailing Address 1601 S California Ave

City	State	Zip Code
Palo Alto	CA	94304

Purpose of Disbursement
Advertising

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		08		2014

Amount of Each Disbursement this Period

106.36

Transaction ID : SB17.6049

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

186.44

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1601 S California Ave

City	State	Zip Code
Palo Alto	CA	94304

Purpose of Disbursement
Advertising

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		25		2014

Amount of Each Disbursement this Period

50.98

Transaction ID : SB17.6078

B. Facebook

Full Name (Last, First, Middle Initial)

Mailing Address 1601 S California Ave

City	State	Zip Code
Palo Alto	CA	94304

Purpose of Disbursement
Advertising

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		27		2014

Amount of Each Disbursement this Period

25.17

Transaction ID : SB17.6082

C. Facebook

Full Name (Last, First, Middle Initial)

Mailing Address 1601 S California Ave

City	State	Zip Code
Palo Alto	CA	94304

Purpose of Disbursement
Advertising

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2014

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.6188

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

126.15

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 69 OF 88

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1601 S California Ave

City	State	Zip Code
Palo Alto	CA	94304

Purpose of Disbursement
Advertising

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 14 / 2014

Amount of Each Disbursement this Period

9.02

Transaction ID : SB17.6210

B. Family Fare

Mailing Address 2300 Fleming Rd

City	State	Zip Code
Greensboro	NC	27410

Purpose of Disbursement
Food / Beverage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 10 / 2014

Amount of Each Disbursement this Period

370.30

Transaction ID : SB17.5971

c. G Graphics, Inc.

Mailing Address 811 Eula St, STE B

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Printing Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 05 / 2014

Amount of Each Disbursement this Period

2726.09

Transaction ID : SB17.6041

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3105.41

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 70 OF 88

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. G Graphics, Inc.

Mailing Address 811 Eula St, STE B

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Printing Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 27 / 2014

Amount of Each Disbursement this Period

1388.70

Transaction ID : SB17.6093

B. Greensboro Coliseum

Mailing Address PO Box 5447

City	State	Zip Code
Greensboro	NC	27435

Purpose of Disbursement
Fundraising Event Tickets

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 28 / 2014

Amount of Each Disbursement this Period

594.00

Transaction ID : SB17.6097

c. Greensboro Coliseum

Mailing Address PO Box 5447

City	State	Zip Code
Greensboro	NC	27435

Purpose of Disbursement
Fundraising Event Tickets

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 06 / 2014

Amount of Each Disbursement this Period

594.00

Transaction ID : SB17.6193

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2576.70

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Hawthorne Inn

Mailing Address 420 High Street SW

City	State	Zip Code
Winston-Salem	NC	27101

Purpose of Disbursement
Event Deposit

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		30		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.6023

B. Hawthorne Inn

Mailing Address 420 High Street SW

City	State	Zip Code
Winston-Salem	NC	27101

Purpose of Disbursement
Site Fee, Catering

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2014

Amount of Each Disbursement this Period

1353.93

Transaction ID : SB17.6036

C. Hawthorne Inn

Mailing Address 420 High Street SW

City	State	Zip Code
Winston-Salem	NC	27101

Purpose of Disbursement
Site Fee, Catering

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		17		2014

Amount of Each Disbursement this Period

1098.40

Transaction ID : SB17.6062

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2952.33

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 72 OF 88

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Sam HoltMailing Address 7484 Woodspring Dr
Apt 208

City Whitsett State NC Zip Code 27377

Purpose of Disbursement
Field Representative

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		12		2014

Amount of Each Disbursement this Period

700.00

Transaction ID : SB17.6201

B. Hotels.com

Mailing Address 10440 N Central Expway

City Dallas State TX Zip Code 75231

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		14		2014

Amount of Each Disbursement this Period

462.00

Transaction ID : SB17.5983

c. Brian Landreth

Mailing Address 7773 A NC HWY 68 N

City Stokesdale State NC Zip Code 27357

Purpose of Disbursement
Field Representative

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.5975

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1662.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 73 OF 88

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Brian Landreth

Mailing Address 7773 A NC HWY 68 N

City	State	Zip Code
Stokesdale	NC	27357

Purpose of Disbursement
Field Representative

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		29		2014

Amount of Each Disbursement this Period

700.00

Transaction ID : SB17.6017

B. Brian Landreth

Mailing Address 7773 A NC HWY 68 N

City	State	Zip Code
Stokesdale	NC	27357

Purpose of Disbursement
Field Representative

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.6058

c. Brian Landreth

Mailing Address 7773 A NC HWY 68 N

City	State	Zip Code
Stokesdale	NC	27357

Purpose of Disbursement
Field Representative

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		27		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.6244

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1700.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 74 OF 88

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Brian Landreth

Mailing Address 7773 A NC HWY 68 N

City	State	Zip Code
Stokesdale	NC	27357

Purpose of Disbursement
Paper, Pens, Cards

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2014

Amount of Each Disbursement this Period

65.00

Transaction ID : SB17.6237

B. Office Depot

Mailing Address 3018 High Point Rd

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2014

Amount of Each Disbursement this Period

65.00

Transaction ID : SB17.6237.0

[MEMO ITEM]

c. Brian Landreth

Mailing Address 7773 A NC HWY 68 N

City	State	Zip Code
Stokesdale	NC	27357

Purpose of Disbursement
Field Representative

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		12		2014

Amount of Each Disbursement this Period

750.00

Transaction ID : SB17.6199

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

815.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 75 OF 88

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Marriott Greensboro-Highpoint Airport

Mailing Address One Marriott Drive

City	State	Zip Code
Greensboro	NC	27409

Purpose of Disbursement
Site Fee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2014

Amount of Each Disbursement this Period

462.60

Transaction ID : SB17.6074

B. Marriott Greensboro-Highpoint Airport

Mailing Address One Marriott Drive

City	State	Zip Code
Greensboro	NC	27409

Purpose of Disbursement
Site Fee, Catering

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		27		2014

Amount of Each Disbursement this Period

167.92

Transaction ID : SB17.6083

c. Office Depot

Mailing Address 3018 High Point Rd

City	State	Zip Code
Greensboro	NC	27403

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2014

Amount of Each Disbursement this Period

240.68

Transaction ID : SB17.5963

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

462.60

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 76 OF 88

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Operation Smile

Mailing Address 502 E Cornwallis Dr

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		07		2014

City	State	Zip Code
Greensboro	NC	27405

Purpose of Disbursement
Sponsorship

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.6046

B. Operation Smile

Mailing Address 502 E Cornwallis Dr

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		15		2014

City	State	Zip Code
Greensboro	NC	27405

Purpose of Disbursement
Sponsorship

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

60.00

Transaction ID : SB17.6061

C. Powell Enterprises

Mailing Address 1635 Nova Ln

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		29		2014

City	State	Zip Code
Burlington	NC	27215

Purpose of Disbursement
Rent

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

175.00

Transaction ID : SB17.6022

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

535.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Powell Enterprises

Mailing Address 1635 Nova Ln

City	State	Zip Code
Burlington	NC	27215

Purpose of Disbursement
Rent

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		27		2014

Amount of Each Disbursement this Period

175.00

Transaction ID : SB17.6084

B. Precision Signz

Mailing Address 1055 Valley Dr

City	State	Zip Code
Bettendorf	IA	52722

Purpose of Disbursement
Printing Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2014

Amount of Each Disbursement this Period

1084.62

Transaction ID : SB17.6222

c. Red Stampede

Mailing Address 6701 Fairview Rd

City	State	Zip Code
Charlotte	NC	28210

Purpose of Disbursement
Online Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		02		2014

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.5951

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1509.62

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Red Stampede

Mailing Address 6701 Fairview Rd

City	State	Zip Code
Charlotte	NC	28210

Purpose of Disbursement
Online Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2014

Amount of Each Disbursement this Period

468.00

Transaction ID : SB17.6037

B. Red Stampede

Mailing Address 6701 Fairview Rd

City	State	Zip Code
Charlotte	NC	28210

Purpose of Disbursement
Online Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2014

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.6038

c. Red Stampede

Mailing Address 6701 Fairview Rd

City	State	Zip Code
Charlotte	NC	28210

Purpose of Disbursement
Online Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		27		2014

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.6081

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

968.00

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Red Stampede

Mailing Address 6701 Fairview Rd

City State Zip Code
Charlotte NC 28210

Purpose of Disbursement
Online Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 04 / 2014

Amount of Each Disbursement this Period

264.88

Transaction ID : SB17.6186

B. Signs By Tomorrow

Mailing Address 4620 West Market St

City State Zip Code
Greensboro NC 27407

Purpose of Disbursement
Printing Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 21 / 2014

Amount of Each Disbursement this Period

178.06

Transaction ID : SB17.6220

c. Starbucks

Mailing Address 2401 Utah Ave S

City State Zip Code
Seattle WA 98134

Purpose of Disbursement
Food / Beverage

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 27 / 2014

Amount of Each Disbursement this Period

275.00

Transaction ID : SB17.6013

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

717.94

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 80 OF 88

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. The Sterling Rental Group

Mailing Address 3224 N. O'HENRY BLVD

City	State	Zip Code
GREENSBORO	NC	27405

Purpose of Disbursement
Rent

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
01 / 29 / 2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.6020

B. The Sterling Rental Group

Mailing Address 3224 N. O'HENRY BLVD

City	State	Zip Code
GREENSBORO	NC	27405

Purpose of Disbursement
Rent

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
02 / 27 / 2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.6086

C. Time Warner Cable

Mailing Address 200 Centreport Dr

City	State	Zip Code
Greensboro	NC	27409

Purpose of Disbursement
Cable / Internet Service

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
02 / 05 / 2014

Amount of Each Disbursement this Period

196.36

Transaction ID : SB17.6042

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2196.36

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Time Warner Media

Mailing Address 200 CentrePort Dr Ste 200

City	State	Zip Code
Greensboro	NC	27409

Purpose of Disbursement
Advertising

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 06 / 2014

Amount of Each Disbursement this Period

4992.05

Transaction ID : SB17.6194

B. Truth Broadcasting

Mailing Address 4405 Providence Ln Ste D

City	State	Zip Code
Winston-Salem	NC	27106

Purpose of Disbursement
Advertising

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 27 / 2014

Amount of Each Disbursement this Period

750.00

Transaction ID : SB17.6091

C. Kelley Tuck

Mailing Address 106 Cheyenne Dr Apt S

City	State	Zip Code
Greensboro	NC	27410

Purpose of Disbursement
Field Representative

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 13 / 2014

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.5977

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

5842.05

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Kyle Blake Van Zandt

Mailing Address 1280 N Peace Haven Rd

City	State	Zip Code
Winston-Salem	NC	27104

Purpose of Disbursement
Field Representative

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		27		2014

Amount of Each Disbursement this Period

2188.92

Transaction ID : SB17.6087

B. Kyle Blake Van Zandt

Mailing Address 1280 N Peace Haven Rd

City	State	Zip Code
Winston-Salem	NC	27104

Purpose of Disbursement
Field Representative

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		12		2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.6200

c. Verizon

Mailing Address 140 West Street

City	State	Zip Code
New York	NY	10007

Purpose of Disbursement
Phone Service

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		22		2014

Amount of Each Disbursement this Period

188.92

Transaction ID : SB17.6004

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2188.92

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Verizon

Mailing Address 140 West Street

City	State	Zip Code
New York	NY	10007

Purpose of Disbursement
Phone Service

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		13		2014

Amount of Each Disbursement this Period

187.68

Transaction ID : SB17.6207

B. VictoryStore.com

Mailing Address 5200 SW 30th St

City	State	Zip Code
Davenport	IA	52802

Purpose of Disbursement
Printing Services

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		19		2014

Amount of Each Disbursement this Period

2801.60

Transaction ID : SB17.6064

c. VictoryStore.com

Mailing Address 5200 SW 30th St

City	State	Zip Code
Davenport	IA	52802

Purpose of Disbursement
Printing Services

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		13		2014

Amount of Each Disbursement this Period

900.00

Transaction ID : SB17.6205

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

3889.28

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Voter Gravity

Mailing Address 121 E Main St

City	State	Zip Code
Purcellville	VA	20132

Purpose of Disbursement
Software

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2014

Amount of Each Disbursement this Period

2756.00

Transaction ID : SB17.6189

B. Bradley Mark Walker

Mailing Address 3315 Van Allen Ct

City	State	Zip Code
Greensboro	NC	27410

Purpose of Disbursement
In-kind - Filing Fee

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	2014	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)	

State: NC District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		10		2014

Amount of Each Disbursement this Period

1740.00

Transaction ID : SB17.5669

c. Bradley Mark Walker

Mailing Address 3315 Van Allen Ct

City	State	Zip Code
Greensboro	NC	27410

Purpose of Disbursement
In-kind - Mileage

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	2014	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)	

State: NC District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

Amount of Each Disbursement this Period

4300.80

Transaction ID : SB17.6298

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

8796.80

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Katrina Whitt

Mailing Address 4817 Fox Chase Rd

City	State	Zip Code
Greensboro	NC	27410

Purpose of Disbursement
Field Representative

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		22		2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.6005

B. Katrina Whitt

Mailing Address 4817 Fox Chase Rd

City	State	Zip Code
Greensboro	NC	27410

Purpose of Disbursement
Bus Services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		27		2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.6088

C. Wilco

Mailing Address 5916 W Market St

City	State	Zip Code
Greensboro	NC	27409

Purpose of Disbursement
Fuel

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		28		2014

Amount of Each Disbursement this Period

351.23

Transaction ID : SB17.6098

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1851.23

56534.38

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 87 OF 88

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Walker 4 NC

Full Name (Last, First, Middle Initial)

A. Guilford County Republican Party

Mailing Address PO Box 10705

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		14		2014

City	State	Zip Code
Greensboro	NC	27404

Amount of Each Disbursement this Period

50.00

Purpose of Disbursement
Non-Federal ContributionCategory/
Type

Transaction ID : SB21.5980

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. Guilford County Republican Party

Mailing Address PO Box 10705

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

City	State	Zip Code
Greensboro	NC	27404

Amount of Each Disbursement this Period

150.00

Purpose of Disbursement
Non-Federal ContributionCategory/
Type

Transaction ID : SB21.6245

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. Guilford County Republican Party

Mailing Address PO Box 10705

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		28		2014

City	State	Zip Code
Greensboro	NC	27404

Amount of Each Disbursement this Period

15.00

Purpose of Disbursement
Non-Federal DonationCategory/
Type

Transaction ID : SB21.6095

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

215.00

